

Meeting with the Youth Leagues CPSC Headquarters Bethesda, MD May 15, 1997

Log of Meeting

Date of Log Entry: May 20, 1997

Source of Log Entry: Susan B. Kyle, Ph.D.

Project Manager, Sports and Recreation

Attendees: See attached list

Summary of Meeting

The meeting was chaired by CPSC Chairman Ann Brown who welcomed the attendees and emphasized that CPSC is interested in working cooperatively with the youth leagues to promote safety in youth baseball. Susan Kyle, CPSC, gave a brief overview of the results of CPSC's special study of youth baseball injuries in general, and facial injuries in particular.

The Amateur Athletic Union, US Slo-Pitch Softball Association, American Amateur Baseball Congress, and Little League Baseball described their safety programs. In addition, both the Amateur Athletic Union and Little League Baseball have injury studies underway and will make their results available to CPSC and the public when complete.

A general discussion followed of the safety equipment used by the various leagues and their experiences with it.

Dr. Robert Crow of C-Flap briefly described his batting helmet face guard and his concerns about visual field limitations and emergency airway access when full face face guards are used.

The information packet that was distributed to attendees is attached. Audio and video tapes of the meeting are available from the CPSC Office of the Secretary by calling 301 504 0800.

N No Mfrs/Prvtblrs or Products Identified

Meeting with the Youth Leagues May 15, 1997 Attendees

At the Table

Amateur Athletic Union

Mr. Jon Vagianos, AAU Baseball Potomac Valley Chairman

American Amateur Baseball Congress

Mr. Joe Cooper, President

Amateur Softball Association of America

Mr. Chris Hutter

Little League Baseball, Inc.

Dr. Creighton Hale, Senior Advisor

Mr. Dan Kirby, Director of Risk Management

US Slo-Pitch Softball Association

Mr. Floyd Salter, Umpire-in-Chief and Co-Chairman of Equipment Safety and Performance Standards Committee

Ms. Mildred Burrell, Girls' Youth National Program Director

Mr. Richard Chappell, Insurance Risk Manager

USA Baseball

Ms. Wanda Rutledge, Deputy Director

Consumer Product Safety Commission

Ms. Ann Brown, Chairman

Mr. Thomas Moore, Commissioner

Ms. Mary Gall, Commissioner

Mr. Walt Sanders, Counselor to the Chairman

Mr. Ron Medford, Assistant Executive Director

Ms. Sue Kyle, Project Manager, Sports and Recreation

Other Attendees

Ms. Amy O'Connell, Sporting Goods Manufacturers Association

Mr. John Whalen, BNA

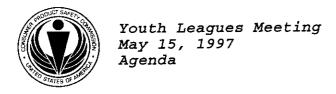
Dr. Robert Crow, C-Flap

Ms. Pary Davis, CPSC, Division of Human Factors

Ms. Elizabeth Leland, CPSC, Directorate for Economic

Analysis

Ms. Prowpit Adler, CPSC, Division of Hazard Analysis



Welcome

Ann Brown, Chairman Consumer Product Safety Commission

Summary of CPSC Data

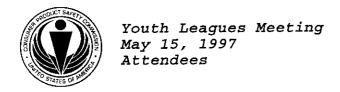
Sue Kyle, Project Manager Consumer Product Safety Commission

Discussion

All

Moderator: Ron Medford, Assistant Executive Director

Consumer Product Safety Commission



Amateur Athletic Union

Mr. Jon Vagianos, AAU Baseball Potomac Valley Chairman

Mr. Neil Parmenter, AAU Baseball National Chair

American Amateur Baseball Congress

Mr. Joe Cooper, President

Amateur Softball Association of America

Mr. Chris Hutter

Little League Baseball, Inc.

Dr. Creighton Hale, Senior Advisor

Mr. Stephen Keener, President

Mr. Dan Kirby, Director of Risk Management

National Amateur Baseball Federation

Mr. Charles Blackburn, Executive Director

US Slo-Pitch Softball Association

Mr. Floyd Salter, Umpire-in-Chief and Co-Chairman of Equipment Safety and Performance Standards Committee

Ms. Mildred Burrell, Girls' Youth National Program Director

Mr. Richard Chappell, Insurance Risk Manager

USA Baseball

Ms. Wanda Rutledge, Deputy Director

Consumer Product Safety Commission

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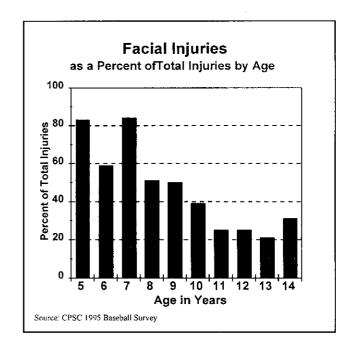
CPSC Youth Baseball, Softball and Tee-Ball Hazard Sketch

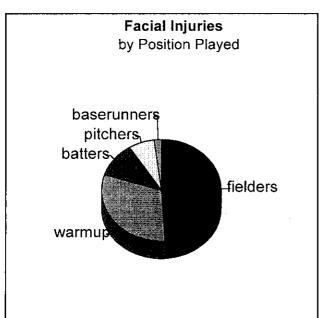
Why Baseball, Softball and Tee-Ball?

- o First among team sports in number of deaths to children
- o 88 deaths to children 5-14 years old, 1973 through 1995
- o Average of 3 to 4 deaths each year
- o Third among team sports in number of injuries to children (after basketball and football)
- o 162,100 baseball-, softball-, and tee-ball related injuries in 1995 to children ages 5-14

Why Face Guards?

o For the younger children, more than half of all baseball-, softball-, and tee-ball-related injuries were facial





- o 9,400 facial injuries 37% of total injuries
- o 72% to 96% in organized play for 6 to 12 year olds
- o 49% to fielders 11% to batters 2% to baserunners
- o 3900 injuries to batter
- o 700 to baserunners
- o 99% of batters were wearing a helmet
- o 16% were wearing a face guard
- o Dixie League data
- o ASTM Standard

Sadler & Company ...

Since 1946

September 20, 1996

VIA FAX (301)504-0124

Ms. Susan B. Kyle, Ph.D. U.S. Consumer Products Safety Commission Washington, D.C. 20207

RE: STUDY ON BATTER'S FACEGUARD

Dear Sue:

As we have discussed on the phone, my insurance agency, Sadler & Company, is the endorsed insurance agency for Dixie Youth Baseball, Inc. (ages 5-12), Dixie Boys/Majors Baseball, Inc. (ages 13-18), and Dixie Softball, Inc. (ages 5-18). In addition, I am the Risk Manager for Dixie Baseball, Inc., which is an administrative organization which performs certain important functions on behalf of the three Dixie organizations.

We have conducted a survey on behalf of the three Dixie organizations in order to determine the effectiveness of the Batter's Paceguard in reducing the frequency of facial injuries resulting to offensive players while batting and baserunning. Our data was gathered from the Excess Accident Insurance claim forms and was input on a customized database management software program in order to track specific injuries within our programs.

Because the data was extracted from the Excess Accident Insurance claim forms, our survey does not track all injuries that occurred within the three Dixie programs as many were not reported where the injured participants sought payment only from their primary insurance carrier. In addition, we only insure about 35% of total leagues under the endorsed insurance programs. As a result, our survey is not all encompassing; however, it is the most representative sample that we are able to draw from the population of total injuries.

Despite our hard work on this project, I must disclaim that I am not a statistical expert. Furthermore, the data is subject to interpretation from our input person and has not been double checked for accuracy.

For the purposes of our survey, it was assumed that the batter's faceguard would be 100% effective in preventing all injuries where a batter was struck in the face by a pitched ball, where a batter was struck in the face by a thrown ball, where a baserunner collided with a baseman, and where a batter warming up was

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struck in the face by the baseball bat of another player warming up. We believe that our assumption is close to being valid as we have only recorded two injuries where a batter's faceguard did not prevent an injury. Both of these incidents occurred when a baserunner collided with a baseman and the batter's faceguard was mashed into the face of the baserunner. Of course, it could be argued that the injury would have been much more severe without the presence of the faceguard.

So far, our survey is limited to the 1994 and 1995 Playing Seasons. In addition, only the Dixie Youth Baseball, Inc. (ages 5-12) portion of the survey has been completed. It is important to note that during the 1994 Playing Season, Dixie Youth Baseball, Inc. had not yet mandated the batter's faceguard. Nevertheless, it is my unofficial estimate that up to 33% of all teams were already voluntarily using the faceguard for ages 5-12. Undoubtedly, more injuries would have been recorded during the 1994 survey if 33% of all teams were not already using the faceguard. 1995 was the first year when use of the batter's faceguard was mandated and thus sets the stage for the comparison of offensive facial injuries for the two years.

Our survey merely measures the frequency of occurrence of certain injuries. In the near future, we will be able to run a severity report that would determine the impact of facial injuries that could have been prevented by the use of the batter's faceguard on the basis of total medical dollars that were paid out. It is my opinion that the facial injury is more severe than the average injury in baseball and as a result, severity may be a better indication of the usefulness

Based upon the above mentioned methodology, the results for the 1994 and 1995 Seasons are listed in a chart on the attached page. Based on our assumptions, the batter's faceguard would have been almost 100% effective and would have prevented 5.8% of injuries during the 1994 Playing Season had it been mandated. It is interesting to note that this number could have very well been close to 8% had 0% of players not voluntarily used the batter's faceguard instead of the

On behalf of Dixie Youth Baseball, Inc., I believe that the numbers justify that mandating the batter's faceguard was a wise decision that will protect our youth for many years to come. In addition, it must be remembered that a facial injury has potential to be much more severe than the average baseball injury, and as a result, the protection provided by the batter's faceguard is even more impressive.

Very truly yours,

John M. Sadler, Jr., JD, CIC

President

JMSjr/ldy

(4)

players not been wearing a batter's faceguard.

into account what the predicted number would have been had 0% of

1994	Year
5 - 12	AGE GROUP
33% (1) 95% (2)	ESTIMATED * OF PLAYERS WEARING DATTER'S . FACEGUARD
441	TOTAL # INJURIES RECORDED IN SURVEY
26 (4) 3 (3)	TOTAL F FACIAL INJURIES TO OFFENSIVE PLAYERS
5.8%	PACIAL INJUNIES

巴 This is a rough estimate of the voluntary use of batter's faceguards based on a survey of several Dixle Officials.

(2) Even though the batter's faceguard was mandated during the 1995 season, we may not have had 100% compliance during practice or warm ups in on-deck area.

3 The 3 injuries were as follows:

2 caused by baserunner collision with baseman where faceguard was mashed into face of baserunner

Perhaps a statistician could adjust this number upwards to take during on-deck warm up and being struck in the nose by a thrown 1 caused by failure of batter to wear helmet with faceguard